DEPARTMENT OF SOCIAL SERVICES
744 P Street, Sacramento, CA 95814
(916) 445-7046

January 6, 1986

ALL-COUNTY LETTER NO. 86-05

TO: ALL COUNTY WELFARE DIRECTORS
ALL COUNTY FISCAL OFFICERS
ALL COUNTY AUDITORS
ALL COUNTY ADMINISTRATIVE SERVICE OFFICERS

SUBJECT: COUNTY WELFARE ADMINISTRATIVE EXPENSE CLAIM

This is to provide claiming instructions for the October-December 1985 quarter. Included are instructions related to the redesigned Administrative Expense Claim, Foster Home Liability Insurance, and the February 1986 time study. General information is also provided on the advance distribution of time study and administration claiming information to county fiscal officers.

The following forms are to be used for the October-December 1985 quarter claim when compiling expenditures for the Administrative Expense Claim:

Form	Revision Date	Form	Revision Date
DFA 325.1	9/85	DFA 327.6	9/85
DFA 325.1A	9/85	DFA 327.7A	9/85
DFA 325.1B	9/85	DFA 327.7B	9/85
DFA 327.1A	9/85	DFA 327.8A	9/85
DFA 327.1B	9/85	DFA 327.8B	9/85
DFA 327.1C	9/85	DFA 327.9	9/85
DFA 327.2A	9/85	DFA 403	7/82
DFA 327.2B	9/85	DFA 50	3/85
DFA 327.2C	9/85	DFA 419	1/83
DFA 327.3A	9/85	DFA 43	8/85
DFA 327.3B	9/85	DFA 46	8/85
DFA 327.4A	9/85	DFA 47	1/85
DFA 327.4B	9/85	DFA 323	8/85
DFA 327.4C	9/85	DFA 856	4/82
DFA 327.5	9/85	DFA 48	7/85

The following forms are to be used for the October-December 1985 quarter claim when compiling the Aid to Families with Dependent Children/Nonassistance Food Stamps (AFDC/NAFS) Eligibility Worker and Staff Cost Distribution Reports:

Form	Revision Date	Form	Revision Date
DFA 327.8A	6/85	DFA 327.8C	6/85
DFA 327.8B	6/85	DFA 327.8D	6/85

Redesigned Administrative Expense Claim

1. Conversion to New Administrative Expense Claim Format

   We would like to thank the counties for their positive reponse to the new
   claim format and for their cooperation in adapting so quickly to this major
   revision. We were impressed by the ability of county staff to complete the
   redesigned claim correctly in its first quarter of use, and appreciate your
   efforts to make the transition between the old and new claims as smooth as
   possible.

   In any major revision such as this one, it is inevitable that some errors
   will occur. Our thanks are extended to those counties who brought the areas
   needing revision or clarification to our attention. Additional modifications
   and improvements suggested by several counties are still under consideration.
   If you wish to recommend further changes, please contact Fiscal Policy and
   Procedures Bureau staff at (916) 445-7046.

2. Instructions for Submitting the October-December 1985 Quarterly Administrative
   Expenditures Claim

   Because of the major revision of the claim and the ongoing compressed time
   frames for releasing the quarterly claim, the claim forms to be used for the
   October-December 1985 quarter are the same as those used for the July-September
   1985 quarter.

   When compiling data on this quarter's claim, please indicate that the claim
   forms being submitted are for the October-December 1985 quarter. This is
   particularly important for those forms which reflect a 9-30-85 quarter date
   but are also being used for the October-December 1985 quarter.

3. Instructions for Submitting Adjustment Claims for the Quarters Ending
   September 1985 and December 1985

   When submitting claims to adjust the July-September 1985 and October-December
   1985 quarters, please indicate on all claim forms the quarter for which the
   claim is to adjust.

4. Completion of the DFA 327.8 (9/85) - Administrative Expense Claim

   This is to provide clarification for completing the DFA 327.8, Program Funding
   forms. The best approach to use in completing the forms is to first determine
   if there are any formulas to be used in lieu of the instructions contained in
   column BP. Program specific formulas can be found in columns BV and BW.

   a. For the social services programs shown on the DFA 327.8A, compute
      the program totals in accordance with the instructions contained
      in column BP.

   b. For the eligibility and nonservices programs shown on lines 33, 34,
      35, 36, 39, 42 and 43 of the DFA 327.8B, compute the program
      totals in accordance with the formulas contained in columns BV
      and BW. The remaining eligibility and nonservices program totals
      are to be computed based on the instructions contained in column BP.

c. Under the new administrative expenditures claim redesign, the sharing ratios shown in column BU represent the Federal (column BQ), State Welfare (column BR) and State Health (column BS) funding sources. Therefore, for both functions use the sharing ratios in column BU to distribute the program totals shown in column BP to the appropriate federal or state funding source column. Any residual amount remaining is to be considered County funds and is to be entered in column BT.

d. The two exceptions to this general methodology for distributing costs to funding source are the social services programs shown on lines 1 and 7 on the DFA 327.8A. For these programs, use the special instructions contained in columns BU, BV and BW to determine the appropriate State Welfare and county shares of expenditures.

5. Welfare Fraud Early Detection/Prevention Program (ED/PP)

All-County Letters 83-112, 84-100 and 85-01 instructed those counties with an approved Fraud Early Detection/Prevention Program (ED/PP) plan on the method of reporting time and costs for Eligibility Workers, Welfare Fraud Investigators and District Attorney Investigators. For those counties affected, the following correction is to be noted for Eligibility Workers performing ED/PP Nonassistance Food Stamp activities.

When the Administrative Expenditures Claim for the July-September 1985 quarter was reformatted, line 55 was designated throughout the claim for identifying ED/PP-NAFS costs. Line 55 on both the Staff Development Funding page (DFA 327.7B) and the Program Funding page (DFA 327.8B) incorrectly reflect funding ratios in column BU as 75 percent federal and 12.5 percent state welfare. The correct funding ratios are 50 percent federal and 25 percent state welfare. The necessary correction will be made on the January-March 1986 quarter's claim.

6. AFDC/NAFS Eligibility Worker and Staff Cost Distribution Report – DFA 327.8A through 8D (3/85)

Effective with the October-December 1985 quarter, counties are to resume the responsibility of completing the AFDC/NAFS Eligibility Worker and Staff Cost Distribution Report forms, DFA 327.8A through 8D, revision date 3/85.

The format design on the front of the forms have not changed; however, in order to capture AFDC/NAFS program data for cost control purposes, the instructions contained on the back of each form have been revised to agree with the new administrative expense claim format. Revised instructions are attached to this letter and supersede those instructions shown on the forms. Counties are to continue to use the forms and to submit them to State Department of Social Services (SDSS) upon completion based on the revised instructions.

Questions concerning the completion of these forms are to be directed to the County Administrative Expense Control Bureau at (916) 322-5802.

Foster Home Liability Insurance

This is to provide clarification regarding the reimbursement of foster home liability insurance on the administrative expenditures claim.

Within the Administrative Standards for Public Social Services, Division 11 covers the Aid to Families with Dependent Children (AFDC) - Foster Care Rate regulations. Sections 11-401.12 and 11-402.211 state that liability insurance which covers the child is an allowable cost. For Group Homes, consideration for liability insurance covering children is included during the rate setting process. For Foster Family Homes, the cost of this insurance is considered as part of the standard rates. Reimbursement of these costs, however, is through the Foster Care assistance claims.

Counties or providers, at their option, may obtain additional liability insurance for children. However, the cost of obtaining the additional insurance is unallowable for federal or state reimbursement on the administrative expenditures claim. These costs are to be claimed to the Other County Only Program.
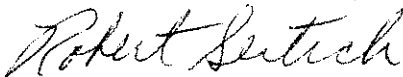
February 1986 Time Studies

There will be no changes to either the Eligibility and Nonservice Time Study (DFA 43) or the Social Services Worker Time Study (DFA 46) for the February 1986 time study month. Therefore, the current versions of both of these forms, with effective dates of August 1985, can be used to prepare any necessary instructions.

General Information

For future reference, the administrative claim forms and time studies will now be sent directly to each fiscal office.

All-County Letters (ACL) and All-County Information Notices (ACIN) issued by the Fiscal Policy and Procedures Bureau which impact claiming or time study procedures will continue to be released to the counties in the normal manner. Only when there are significant changes will an advance copy of an ACL or ACIN be transmitted directly to each fiscal officer.

Any questions regarding this letter should be directed to the Fiscal Policy and Procedures Bureau at (916) 445-7046.

ROBERT T. SERTICH
Deputy Director
Administration

Attachment

cc: CWDA

AFDC/NAFS Eligibility Worker and Staff Cost Distribution Report

ABCD INSTRUCTIONS FISCAL YEAR 1985/86.

(DFA 327.8A)

PART 1 (AFDC STAFF/COSTS-FG/U)

1. For Lines A1-A3, Column 2, bring forward hours from DFA 323 Section A, Lines A1-A3, respectively and accumulate on the total lines provided. Line A of Column 2 should reflect the total program hours and as a check should equal DFA 323 Section A, Line A6, total allocable hours. For lines A4-A5 on the DFA 323, include ECS/Fair Hearing time in "Continuing Function."

2. Determine ratios by dividing hours for each classification (EW/Sup) by the total program hours for AFDC-FG/U(Line A, Column 2).

3. Enter total of classification ratios (by function) from Column 3.

4. (a) Determine the total number of quarterly EW's by multiplying DFA 403, Part B, Line 3c times the AFDC (FG/U) allocation ratio(DFA 323) times 3. Number should extend to one decimal place.

    (b) Enter figure obtained in (a) above and multiply times Column 3 ratios.

5. Transfer figures obtained in Part 3, Line 3, as applicable.

6. Subtract Column 6 from Column 5.

7. Transfer figures obtained in DFA 327.8B, Part 1, Lines A-D, Column 11, as applicable.

PART 2 (AFDC) STAFF/COSTS-FC

1. For Lines A1 and A2, Column 2, bring forward hours from DFA 323, Section G, Lines G1 and G2 respectively and accumulate on the total lines provided. Line A of Column 2 should reflect the total program hours which should = DFA 323 Section G, Line G3, total allocable hours.

2. Determine ratios by dividing hours for each classification (EW/Sup) by the total program hours for AFDC-FC (Line A, Column 2).

3. Enter total of classification ratios (by function) from Column 3.

4. (a) Determine the total number of quarterly EW's by multiplying DFA 403, Part B, Line 3c times the AFDC (FC) allocation ratio (DFA 323) times 3. Number should extend to one decimal place.

(b) Enter the total obtained in (a) above and multiply times Column 3 ratios.

5. Transfer figures obtained in DFA 327.8B, Part 2, Lines A-C, Column 9, as applicable.

PART 4 (AFDC CHILD SUPPORT DISREGARD COSTS)

1. For lines A and B, transfer from DFA 327.1 item 53, Columns I and K, respectively.

2. For line C, transfer from DFA 327.2 item 53, Column AE.

3. For line D, transfer from DFA 327.4 item 53, Column AR.

4. Sum of lines A-D Column 2.

5. Checkpoint 2/. This entry should equal DFA 327.8 item 53, Column BR.

ABCD INSTRUCTIONS
(327.8B)

PART 1. (AFDC-FG/U)

1. (a) For Line D, transfer from DFA 327.1 Line 33, Column I.

(b) For Lines A-C, multiply DFA 327.8B, Part 1, Column 2, Line D (subtotal-staff costs) by Function Ratios, DFA 327.8A, Part 1, Column 4, as applicable.

(c) For Lines E-G, transfer from DFA 327.1, Line 33, Column K; DFA 327.2, Line 33, Column AE; DFA 327.4, Line 33, Column AR, respectively.

(d) For Line H, transfer from DFA 327.4, Line 74, Column AV.

(e) For Line I, transfer from DFA 327.4, Line 75, Column AV.

2. (a) Bring AFDC Intake Ratio forward from DFA 327.8A, Part 1, Line A1, Column 4.

(b) Multiply the AFDC Intake Ratio times Column 2, Lines E and F.

3. (a) Bring FG/U ratio forward from DFA 325.1, Item AF, Col. 4.

(b) Multiply the FG/U ratio times Column 4, Lines B, C, E, and F. Follow instructions on form to compute Columns 6 - 11.

4. Checkpoint 4/. This line should equal the sum of DFA 327.8, Line 33 and 34, Column BR.

PART 2. AFDC-FC

1. (a) For Line C, transfer from DFA 327.1, Line 42, Column I.

(b) For Lines A and B, multiply DFA 327.8B, Part 2, Line C (subtotal-staff costs) by Function Ratios, DFA 327.8A, Part 2, Column 4, as applicable.

(c) For Lines D-F transfer from DFA 327.1 Line 42, Column K; DFA 327.2, Line 42, Column AE; DFA 327.4, Line 42, Column AR.

2. (a) Bring AFDC Intake Ratio forward from DFA 327.8A, Part 2, Line A1 Column 4.

(b) Multiply the AFDC Intake Ratio times Column 2, Lines D and E.

3. (a) Bring FC ratio forward from DFA 325.1 Item AF, Column 5.

(b) Multiply the FC ratio times Column 4, Lines B, D, and E. Follow instructions on form to compute Columns 6 - 9.

4. Checkpoint 4/. This line should equal DFA 327.8, Line 42 and 43, Column BR.

PART 3. AFDC FRAUD EARLY DETECTION

1. For Lines A-D, trans. from DFA 327.1 Line 54 Column I and K; DFA 327.2, Line 54, Column AE; DFA 327.4, Line 54, Column AR, respectively.

Note: Fill out only if eligibility workers are performing this function.

Checkpoint: Part 3 State Share of EW Early Fraud function should equal DFA 327.8, Line 54, Column BR.

ABCD INSTRUCTIONS
(DFA 327.8C)

PART 1. EA-ANEC COST DISTRIBUTION

1. For lines A-D, trans. from DFA 327.1 Line 44, Column I and K; plus DFA 327.2 Line 44, Column AE; DFA 327.4 Line 44, Column AR, respectively.

2. Checkpoint. This line should equal DFA 327.8, Line 44, Column BR.

PART 2. EA-ANEC STAFF DISTRIBUTION

1. Bring hours forward from DFA 323, Line H, as applicable.

2. Determine ratios by dividing hours for each classification
(EW/Sup) by the total program hours for EA-ANEC (Column 2).

3. (a) Determine the total number of quarterly EW's by
multiplying DFA 403, Part B, Line 3C times the EA-ANEC allocation
ratio (DFA 323) times 3. Number should extend to one decimal
place.

    (b) Enter the total obtained in (a) above and multiply times
Column 3 ratios.

4. Transfer figure obtained in DFA 327.8C, Part 1, Line A,
Column 3.

PART 3. TOTAL AFDC STATE SHARE-(FG/U PLUS FC PLUS EA-ANEC)

1. DFA 327.8B Part 1, Line D, Column 11 plus DFA 327.8B, Part 2,
Line C, Column 9, plus Part 3, Line A, Column 3, plus DFA 327.8C,
Part 1, Line A, Column 3.

2. DFA 327.8B, Part 1, Line E, Column 11 plus DFA 327.8B, Part
2, Line D, Column 9, plus Part 3, Line B, Column 3, plus DFA
327.8C, Part 1, Line B, Column 3.

3. DFA 327.8B, Part 1, Line F Column 11 plus DFA 327.8B, Part 2,
Line E, Column 9, plus Part 3, Line C, Column 3, plus DFA 327.8C,
Part 1, Line C, Column 3.

4. DFA 327.8A, Part 4, Line E, Column 3, plus DFA 327.8B, Part
1, Line G, Column 11 plus DFA 327.8B, Part 2, Line F, Column 9,
plus Part 3, Line D, Column 3, plus DFA 327.8C, Part 1, Line D,
Column 3.

5. DFA 327.8B, Part 1, Line H, Column 11 plus Part 1, Line I,
Column 11.

Checkpoint: The sum of the figures in Part 3, Line A-E should
equal the sum of lines 33, 34, 42, 43, 44, 53, and 54 from the
DFA 327.8, Column BR.

PART 4. TOTAL AFDC STAFF/COSTS (FG/U PLUS FC PLUS EA-ANEC)

1. (a) Intake - Add together DFA 327.8A, Part 1, Lines A1,
Column 7 plus DFA 327.8A, Part 2, Lines A1, Column 5 plus DFA
327.8C, Part 2, Line A1, Column 4, as applicable.

    (b) Continuing and QC - Add together DFA 327.8A, Part 1,
Lines A2-A3, Column 7 plus DFA 327.8A, Part 2, Line A2, Column 5.

2. (a) Intake – Add together DFA 327.8A, Part 1 Line A1 Column 8 plus DFA 327.8A, Part 2, Line A1, Column 6 plus DFA 327.8C, Part 2, Lines A1, Column 5, as applicable.

(b) Continuing and QC – Add together DFA 327.8A, Part 1, Lines A2-A3, Column 8 plus DFA 327.8A, Part 2, Line A2, Column 6, as applicable.

PART 5. WELFARE FRAUD STAFF DISTRIBUTION

1. For Line A, take DFA 403, Part C, Line 3c times 3.

2. For Line B, take DFA 403, Part C, Line 3c times 3 times the sum of casework ratio from DFA 327.1, item 74 plus 75.

3. For Line C, take DFA 403, Part C, Line 3c times 3 times one-half of the sum of casework ratio from DFA 327.1, item 77 plus 78.

4. For Line D, add Line B plus C from DFA 327.8C.

5. For Line E, take DFA 403, Part C, Line 3c times 3 times the casework ratio from DFA 327.1, item 76.

6. For Line F, use same figure as 3, above.

7. For Line G, add Line E plus F.

ABCD INSTRUCTIONS
(DFA 327.8D)

PART 1. NAFS STAFF DISTRIBUTION

1. For Lines A1 bring hours forward from DFA 323, Section B, Line B1, respectively. For Line A2 bring hours forward from DFA 323, Section B, Line B2 and combine with any Food Stamp Administrative Hearing hours identified on the DFA 323, as appropriate. Accumulate on the total lines provided. Also include in "Continuing Function" ECS/Fair Hearing hours.

2. Determine ratios by dividing hours for each classification by the total NAFS program hours for Line A, Column 2.

3. Enter total of classification ratios (by function) from Column 3.

4. (a) Determine the total number of quarterly EW's by multiplying DFA 403, Part B, Line 3c times 3 times the sum of the NAFS allocation ratio plus FS Administrative Hearing allocation ratio, if applicable (DFA 323). Distribute Column 5 by ratio in Column 3. Number should extend to one decimal place.

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5. For Line A, transfer from DFA 327.8A, Part 1 Line A Column 6. For Line A2 transfer from DFA 327.8A, Part 1, Lines A2-A3 and combine EW/SUP as appropriate.

6. Add Column 5 plus Column 6.

7. Enter state share figure obtained in Part 2, Lines A-C, Column 5, DFA 327.8D as applicable.

PART 2. NAFS COST DISTRIBUTION.

1. (a) For Line C, transfer from DFA 327.1, Line 35, Column I.

    (b) For Lines A and B, multiply DFA 327.8D Part 2, Column 2, Line C (staff costs-subtotal)by Funct. Ratios DFA 327.8D Part 1, Column 4, as applicable.

2. For Lines D and E, trans. from DFA 327.1, Line 35, Column K; DFA 327.2, Line 35, Column AE.

3. For Line F, transfer from DFA 327.4, Line 35, Column AR. Do not include Issuance costs.

4. For Line G, transfer from DFA 327.4, Line 76, Column AV.

5. For Line H, transfer the sum of Food Stamp Administrative Hearing costs shown on the DFA 327.1, Line 36, Column I and K; DFA 327.2, Line 36, Column AE; DFA 327.4, Line 36, Column AR.

6. For Line J, transfer from DFA 325.1B all Food Stamp Direct Costs associated with Issuance only.

7. Transfer only Food Stamp On-Line Issuance costs shown on the DFA 325.1B.

8. Transfer from DFA 327.8B, Part 1, Column 8, as applicable. For Line B add together AFDC Continuing and QC Staff Costs.

9. Checkpoint 9/. This line should equal the sum of DFA 327.8, Lines 35, 36 and 37, Column BR.

PART 3. NAFS EARLY FRAUD DISTRIBUTION.

1. For Lines A-D, trans. from DFA 327.1 Line 55 Column I and K; DFA 327.2, Line 55, Column AE; DFA 327.4, Line 55, Column AR, respectively.

Note: Fill out only if eligibility workers are performing this function.

Checkpoint. Part 3 State Share of EW Early Fraud function should equal DFA 327.8, Line 55, Column BR.